Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MASSACHUSETTS, BOSTON DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu	e the name that is on government-issued ire identification (for	Kelly First name	First name
		nple, your driver's use or passport).	Jo Middle name	Middle name
	iden	g your picture tification to your meeting the trustee.	Paia	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have		
		de your married or den names.		
3.	you num Indi	the last 4 digits of r Social Security liber or federal vidual Taxpayer tification number	xxx-xx-0799	

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 2 of 54

Case number (if known)

Debtor 1 Reis, Kelly Jo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		334 Gibbs St Fall River, MA 02720-4310 Number, Street, City, State & ZIP Code Bristol County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Document Page 3 of 54 Case number (if known) Debtor 1 Reis, Kelly Jo Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 7. The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last Yes. 8 years? District of When 7/02/10 10-17319 District Massachusetts Case number When District Case number When Case number District 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing ☐ Yes. this case with you, or by a business partner, or by an affiliate?

Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known

11. Do you rent your residence?

■ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Document Page 4 of 54 Case number (if known) Debtor 1 Reis, Kelly Jo Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

Do you own or have any property that poses or is alleged to pose a threat of Yes. imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 5 of 54

Debtor 1 Reis, Kelly Jo

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 6 of 54

Case number (if known) Debtor 1 Reis, Kelly Jo **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 ☐ More than \$50 billion □ \$500,001 - \$1 million □ \$100,000,001 - \$500 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kelly J. Reis Signature of Debtor 2 Kelly Jo Reis Signature of Debtor 1 Executed on Executed on February 4, 2019 MM / DD / YYYY MM / DD / YYYY

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 7 of 54

Debtor 1 Reis, Kelly Jo

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher Carreiro	Date	February 4, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Christopher Carreiro		
Printed name Carreiro Law Office, PLLC		
Firm name		
1010 Gar Hwy Ste 12		
Swansea, MÁ 02777-4566		
Number, Street, City, State & ZIP Code		
Contact phone (508) 812-0210	Email address	chris@carreirophillis.com
693545		
Bar number & State		

Certificate Number: 16199-MA-CC-032215824



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 28, 2019</u>, at <u>11:51</u> o'clock <u>AM EST</u>, <u>Kelly Jo Reis</u> received from <u>CC Advising</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of Massachusetts</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 28, 2019 By: /s/Cristy Tackett

Name: Cristy Tackett

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

		Docume	ent Page 9 of 54		
Fill in the	his information to ident	ify your case:			
Debtor 1	Kelly Jo Reis				
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MASSAC	HUSETTS, BOSTON DIVISION		
Case number (if known)					☐ Check if this is an amended filing
					amended ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,110.29
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,110.29
Par	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	9,472.38
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & Chedule E/F	\$	12,881.19
	Your total liabilities	\$	22,353.57
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	2,525.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,555.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your oth	er sched	ules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	rsonal, fa	mily, or household

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Desc Main Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Document

Page 10 of 54 Case number (if known) Debtor 1 Reis, Kelly Jo

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,582.10 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: 9.

From Bort 4 on Colombia E/E against a fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 19-10/01 Filed 02/04/19 Entered 02/04/19 10:40:24

		Document Page 11 of 54		
Fill i	n this information to identi	fy your case and this filing:		
ebtor 1	Kelly Jo Reis	•		
	First Name	Middle Name Last Name		
ebtor 2 pouse, if filing)	First Name	Middle Name Last Name		
-		DISTRICT OF MASSACHUSETTS, BOSTON DIVISION		
iiled State	s Bankruptcy Court for the:	DISTRICT OF MASSACHUSETTS, BOSTON DIVISION		
ase numbe	er			☐ Check if this is a amended filing
fficial	Form 106A/B			
	ule A/B: Prop	nertv		12/15
		e items. List an asset only once. If an asset fits in more than o		
rt 1: Desc	•	g, Land, or Other Real Estate You Own or Have an Interest In		
o you owr	n or have any legal or equitable	e interest in any residence, building, land, or similar property?		
No Go to				
- 140. OO K	o Part 2.			
_	o Part 2. nere is the property?			
Yes. Wh	nere is the property?			
Yes. Whomat 2: Description Description	eribe Your Vehicles lease, or have legal or equ	itable interest in any vehicles, whether they are register, also report it on Schedule G: Executory Contracts and Une		cles you own that
Yes. What is a part of the control o	eribe Your Vehicles lease, or have legal or equ	, also report it on Schedule G: Executory Contracts and Une		cles you own that
Yes. What 2: Description own, neone else	ribe Your Vehicles lease, or have legal or equentives. If you lease a vehicle, s, trucks, tractors, sport ut	, also report it on Schedule G: Executory Contracts and Une	Do not deduct secured cl	laims or exemptions. Put ed claims on <i>Schedule D:</i>
Yes. What 2: Description own, neone else Cars, van: No Yes 1 Make: Model:	ribe Your Vehicles lease, or have legal or equence drives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD	who has an interest in the property? Check one	Do not deduct secured cl	aims or exemptions. Put
Yes. What 2: Description of the control of the cont	Pribe Your Vehicles Lease, or have legal or equeled rives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured ci the amount of any secure Creditors Who Have Class Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Yes. What 2: Description of the control of the cont	Pribe Your Vehicles Lease, or have legal or equestrives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD	who has an interest in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property.
Yes. Where the control of the contro	Lease, or have legal or equestrives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD 2007 Ximate mileage: 83	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured ci the amount of any secure Creditors Who Have Class Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Yes. Who tell Yes. Who tell Yes. Who tell Yes. Make: Model: Year: Approx Other in	Dodge Nitro 2WD 2007 ximate mileage: Chrysler	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property? \$5,000.00 Do not deduct secured of the amount of any secure	laims or exemptions. Put sed claims on <i>Schedule D: ims Secured by Property</i> . Current value of the portion you own? \$0.0
Yes. What 2: Description of the control of the cont	Pribe Your Vehicles Ilease, or have legal or equestrives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD 2007 ximate mileage: 83 information: Chrysler Pacifica 2WD 2005	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Check one Debtor 2 only Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property? \$5,000.00 Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$0.0 aims or exemptions. Put ed claims on Schedule D:
Yes. What 2: Description of the content of the cont	Pribe Your Vehicles Ilease, or have legal or equestrives. If you lease a vehicle, s, trucks, tractors, sport ut Dodge Nitro 2WD 2007 ximate mileage: 83 information: Chrysler Pacifica 2WD 2005	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Check one Debtor 2 only Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property? \$5,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$0.0 Italiams or exemptions. Put ad claims on Schedule D: ims Secured by Property.

☐ Yes

	Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/	04/19 10:40:24 Desc	: Main
Debtor 1	Document Page 12 of 5 Reis, Kelly Jo	Case number (if known)	
	the dollar value of the portion you own for all of your entries from Part 2, including have attached for Part 2. Write that number here	any entries for pages	\$1,340.00
	Describe Your Personal and Household Items		
·	own or have any legal or equitable interest in any of the following items?	po Do	rrent value of the rtion you own? not deduct secured ims or exemptions.
<i>Exam</i> µ □ No	ehold goods and furnishings mples: Major appliances, furniture, linens, china, kitchenware o es. Describe		
	Living room, 2 bedroom sets, Kitchen table and chairs dryer, dishwasher, refrigerator, stove & microwave.	, washer,	\$1,500.00
□ No	nples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printe including cell phones, cameras, media players, games	rs, scanners; music collections; ele	ectronic devices
	3 Televisions, cell phone.	_	\$200.00
Examp ■ No	ctibles of value mples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other arcollections, memorabilia, collectibles bes. Describe	t objects; stamp, coin, or baseball o	card collections; other
Examp	oment for sports and hobbies nples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, go instruments o es. Describe	f clubs, skis; canoes and kayaks; c	arpentry tools; musical
■ No	amples: Pistols, rifles, shotguns, ammunition, and related equipment		
■ No	amples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
■ No	amples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewe	elry, watches, gems, gold, silver	
<i>Exan</i> ■ No	-farm animals amples: Dogs, cats, birds, horses bes. Describe		
■ No	other personal and household items you did not already list, including any health a bes. Give specific information	nids you did not list	

Official Form 106A/B Schedule A/B: Property page 2

\$1,700.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Document Page 13 of 54 . Case number*(if known)* Debtor 1 Reis, Kelly Jo Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Fall River Municipal Credit Union** \$5.19 **Savings Account** 17.1. Checking Account Fall River Municipal Credit Union \$410.10 17.2 **Fall River Municipal Credit Union** \$5.00 **Savings Account** 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

Schedule A/B: Property

☐ Yes.....

Official Form 106A/B

		Case 19-10401	Doc 1	Filed 02/04/19 Document	Entered 02/04 Page 14 of 54	1/19 10:40:24	Desc Main
De	ebtor 1	Reis, Kelly Jo		Boodinone		ase number (if known)	
25.	■ No	equitable or future interes		ty (other than anything	listed in line 1), and ri	ghts or powers exer	cisable for your benefit
	☐ Yes.	Give specific information a	bout them				
26.	Examp ■ No	s, copyrights, trademarks, oles: Internet domain names, Give specific information a	websites, pro				
27		es, franchises, and other o		aibles			
21.	Examp ■ No	oles: Building permits, exclus	sive licenses,		oldings, liquor licenses,	professional licenses	
	☐ Yes.	Give specific information a	bout them				
M	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you					
	□ No ■ Yes.	Give specific information abo	out them, incl	uding whether you alread	y filed the returns and the	e tax years	
			2018	3 Federal Tax Refun	d		\$537.00
			2018	3 State Tax Return			\$113.00
29.	Examp ■ No	support oles: Past due or lump sum a	,	usal support, child suppo	rt, maintenance, divorce	e settlement, property	settlement
30.	Examp	amounts someone owes you bles: Unpaid wages, disability unpaid loans you made	y insurance pa		s, sick pay, vacation pay	, workers' compensat	ion, Social Security benefits;
	■ No □ Yes.	Give specific information					
31.		ts in insurance policies oles: Health, disability, or life	insurance; he	ealth savings account (HS	SA); credit, homeowner's	, or renter's insurance	
	☐ Yes.	Name the insurance compar Com	ny of each pol pany name:	icy and list its value.	Beneficiary	r.	Surrender or refund value:
32.		erest in property that is do are the beneficiary of a living				ntly entitled to receive	property because someone has
	_	Give specific information					
33.	_Examp	against third parties, whe				payment	
	■ No □ Yes.	Describe each claim					
34.	■ No	contingent and unliquidate	ed claims of	every nature, including	counterclaims of the o	lebtor and rights to s	et off claims
C "		Describe each claim		0-11-1- 0/5-5	lean arti.		
OII	ıcıaı Forn	n 106A/B		Schedule A/B: P	торепу		page 4

Debter 1	Case 19-10401	Doc 1	Filed 02/04/19 Document	Entered 02 Page 15 of	2/04/19 10:40:24 54 Case number (if known)	Desc Main
Debtor 1	Reis, Kelly Jo				Case number (if known)	
■ No	inancial assets you did not Give specific information	already list				
	Civo opocino imornianorii.					
	the dollar value of all of yo 4. Write that number here					\$1,070.29
Part 5:	Describe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estat	te in Part 1.	
37. Do you	ı own or have any legal or equi	table interest i	n any business-related pr	operty?		
■ No. 0	Go to Part 6.					
☐ Yes.	Go to line 38.					
	Describe Any Farm- and Commo			or Have an Interest	t In.	
46. Do vo	ou own or have any legal or	equitable into	erest in any farm- or co	ommercial fishing	-related property?	
	o. Go to Part 7.		, , , , , , , , , , , , , , , , , , , ,	.		
□Y€	es. Go to line 47.					
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above		
53. Do yo	ou have other property of ar	ny kind you d	id not already list?			
Exan	nples: Season tickets, country					
■ No	O					
⊔ Yes	Give specific information					
54. Add	the dollar value of all of yo	our entries fro	om Part 7. Write that nu	mber here		\$0.00
	·					
Part 8:	List the Totals of Each Part	of this Form				
55 Part	1: Total real estate, line 2					\$0.00
	2: Total vehicles, line 5			\$1,340.00		φυ.υυ_
	: 3: Total personal and hous	sehold items,	line 15	\$1,700.00		
58. Part	4: Total financial assets, li	ne 36	_	\$1,070.29		
59. Part	5: Total business-related p	roperty, line	45	\$0.00		
60. Part	6: Total farm- and fishing-r	related prope	rty, line 52	\$0.00		
61. Part	7: Total other property not	listed, line 5	4 +	\$0.00		
62. Tot a	al personal property. Add lin	nes 56 through	n 61	\$4,110.29	Copy personal property to	tal \$4,110.29
63. Tota	al of all property on Schedu	le A/B. Add lir	ne 55 + line 62			\$4,110.29

Official Form 106A/B Schedule A/B: Property page 5

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

	DUGIIIIE	III PAUE 10 ULD4		
is information to identif	fy your case:			
Kelly Jo Reis				
First Name	Middle Name	Last Name)	
First Name	Middle Name	Last Name		
ankruptcy Court for the:	DISTRICT OF MASSAC	HUSETTS, BOSTON DIVISION		
			-	
	Kelly Jo Reis First Name	Kelly Jo Reis First Name Middle Name Middle Name	Kelly Jo Reis First Name Middle Name Last Name First Name Middle Name Last Name	Kelly Jo Reis First Name Middle Name Last Name First Name Middle Name Last Name Ankruptcy Court for the: DISTRICT OF MASSACHUSETTS, BOSTON DIVISION

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the	Property	You	Claim a	s Exempt
---------	----------	-----	----------	-----	---------	----------

1.	ns are you claiming? Check one only, even if your spouse is filing	ן with נ	you.
٠.	is are you diamining. Chook one only, even if your operate is thing	1 ×	V 1C1 1

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Chrysler Pacifica 2WD	\$1,340.00	\$1,340.00 100% of fair market value, up to any applicable statutory limit		MGLA c.235 § 34(16)	
	2005 106660 Line from <i>Schedule A/B</i> : 3.2					
	Living room, 2 bedroom sets, Kitchen table and chairs, washer,	\$1,500.00		\$1,500.00	MGLA c.235 § 34(2)	
	dryer, dishwasher, refrigerator, stove & microwave. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
	3 Televisions, cell phone. Line from Schedule A/B 7.1	\$200.00		\$200.00	MGLA c.235 § 34(2)	
	Line nom Suredule A/L 1.1			100% of fair market value, up to any applicable statutory limit		
	Fall River Municipal Credit Union Line from Schedule A/B 17.1	\$5.19		\$5.19	MGLA c.235 § 34(15)	
	Enternesia Constant (V.E. TVI)			100% of fair market value, up to any applicable statutory limit		
	Fall River Municipal Credit Union Line from Schedule A/B 17.2	\$410.10		\$410.10	MGLA c.235 § 34(15)	
	Elle Holli Goricadie A/D. 11.2			100% of fair market value, up to any applicable statutory limit		

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 17 of 54

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Fall River Municipal Credit Union Line from Schedule A/B 17.3	\$5.00		\$5.00	MGLA c.235 § 34(15)
Line non seriedate ALL 17.5			100% of fair market value, up to any applicable statutory limit	
2018 Federal Tax Refund Line from Schedule A/B 28.1	100% of fair market value, u		\$537.00	MGLA c. 235 § 34(17)
Ellio Holli osilodalo 702 Zo. 1			100% of fair market value, up to any applicable statutory limit	
2018 State Tax Return	\$113.00		\$113.00	MGLA c. 235 § 34(17)
Line Holl Schedule AVD. 20:2			100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covered	years after that for case	s filed	, ,	
□ No	•	*	•	

Yes

Case 19-10	0401 Doc 1	Filed 02/04/19 Document	Entere Page 18	d 02/04/19 10:4 3 of 54	40:24 Des	c Main
Fill in this information	n to identify your c	ase:				
Debtor 1 Kelly Jo		/liddle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name		fiddle Name	Last Name			
United States Bankruptcy Cou		RICT OF MASSACHUSET	TS, BOSTON	N DIVISION		
Case number(if known)					_	heck if this is an nended filing
Official Form 106D						
Schedule D: Cred	ditors Who	Have Claims S	Secure	d by Property	y	12/15
e as complete and accurate as eeded, copy the Additional Pag nown).						
. Do any creditors have claims	secured by your prop	erty?				
☐ No. Check this box and	submit this form to t	he court with your other so	hedules. You	have nothing else to rep	oort on this form.	
Yes. Fill in all of the info	ormation below.					
Part 1: List All Secured C	laims					
2. List all secured claims. If a cr	editor has more than or	ne secured claim, list the cred	ditor separately	Column A	Column B	Column C
for each claim. If more than one of much as possible, list the claims in				Amount of claim Do not deduct the value of collateral.	Value of collatera that supports this claim	
2.1 Wells Fargo Dealer	Describe	the property that secures t	he claim:	\$9,472.38	\$5,000.	
Creditor's Name	2007 De	odge Nitro 2WD				
PO Box 17900 Denver, CO 80217-0	apply.	date you file, the claim is:	Check all that			
Number, Street, City, State & Zi						
Who owes the debt? Check on	L Disput e. Nature of	ed f lien. Check all that apply.				
Debtor 1 only	_	reement you made (such as n	nortgage or sec	cured		
Debtor 2 only	car lo	an)				
Debtor 1 and Debtor 2 only	☐ Statuto	ory lien (such as tax lien, med	chanic's lien)			
At least one of the debtors and	d another	nent lien from a lawsuit				
Check if this claim relates to community debt	Other	(including a right to offset)				
Date debt was incurred	La	st 4 digits of account numb	per <u>9412</u>			
Add the dollar value of your ent	ries in Column A on t	his page. Write that number	r here:	\$9,472.	.38	
If this is the last page of your fo				Φ0,47Ω		

Write that number here:

\$9,472.38

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Ŭ	430 13 10-01	Document Document	Page 1	9 of 54	10.24 DCS	o man
Fill in this in	formation to identify you					
Debtor 1	Kally la Pais					
Debior 1	Kelly Jo Reis First Name	Middle Name	Last Name		}	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	DISTRICT OF MASSACHUSE	rts, bosto	N DIVISION		
Case number						
(if known)					□ c	heck if this is an
					aı	mended filing
Official For	m 106F/F					
		ho Have Unsecured	Claime			12/15
		e Part 1 for creditors with PRIORITY		Don't 2 for anaditors with NC	ONDDIODITY eleim	
Schedule G: Exec): Creditors Who	cutory Contracts and Unexp Have Claims Secured by Pr Page to this page. If you ha	that could result in a claim. Also lis ired Leases (Official Form 106G). Do operty. If more space is needed, co we no information to report in a Part	o not include a py the Part yo	any creditors with partially ou need, fill it out, number	y secured claims to the entries in the	hat are listed in Schedule boxes on the left. Attach
Part 1: List	All of Your PRIORITY Un	secured Claims				
 Do any credi 	itors have priority unsecure	d claims against you?				
No. Go to	Part 2.					
☐ Yes.						
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims				
_ '	itors have nonpriority unsect	art. Submit this form to the court with y	our other sche	edules.		
unsecured cla	aim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, ist the other creditors in Part 3.If you ha	identify what t	type of claim it is. Do not list	claims already inclu	uded in Part 1. If more
						Total claim
4.1 Amaz	on/Synchrony Bank	Last 4 digits of acco	ount number	8457		\$727.02
Nonprior	rity Creditor's Name	When was the debt	:			
PO Bo	x 965060	when was the debt	incurreur			
	do, FL 32896-5060					
	Street City State Zlp Code	As of the date you f	ile, the claim	is: Check all that apply		
Who inc	curred the debt? Check one.					
■ Debt	or 1 only	☐ Contingent				
☐ Debt	or 2 only	☐ Unliquidated				
☐ Debt	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and and		ITY unsecure	d claim:		
☐ Chec	ck if this claim is for a comi	munity				
debt				aration agreement or divorce	e that you did not	
	aim subject to offset?	report as priority clair				
No		•	or profit-sharin	ng plans, and other similar d	ebts	
☐ Yes		Other. Specify				

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 20 of 54

Debtor 1 Reis, Kelly Jo Case number (f known) \$1,220.00 4.2 **Big Lots Credit Card** Last 4 digits of account number 0965 Nonpriority Creditor's Name When was the debt incurred? **Comenity Capital Bank Bankruptcy** Departm PO Box 183043 Columbus, OH 43218-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Capital One Bank (USA), N.A. Last 4 digits of account number 0570 \$2,514.57 Nonpriority Creditor's Name When was the debt incurred? PO Box 71083 Charlotte, NC 28272-1083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Capital One Bank, N.A. Last 4 digits of account number 5013 \$807.50 Nonpriority Creditor's Name When was the debt incurred? PO Box 71083 Charlotte, NC 28272-1083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 21 of 54 Case number (f known)

Debtor 1 Reis, Kelly Jo 4.5 \$579.00 Collection Last 4 digits of account number 8499 Nonpriority Creditor's Name When was the debt incurred? 2018-11 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account 4.6 \$1,876.00 Comenitybank/wayfair Last 4 digits of account number 5790 Nonpriority Creditor's Name **Comenity Bank Bankruptcy** When was the debt incurred? 2017-09 **Department** PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.7 \$201.21 **DirectTV** Last 4 digits of account number 9485 Nonpriority Creditor's Name When was the debt incurred? PO Box 5007 Carol Stream, IL 60197-5007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 22 of 54
Case number (f known)

Debtor 1 Reis, Kelly Jo 4.8 \$287.00 **Dutchman Dental, LLC** Last 4 digits of account number 5966 Nonpriority Creditor's Name When was the debt incurred? 199 Pleasant St Fall River, MA 02721-3013 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 **George Rodrigues DDS** Last 4 digits of account number 5064 \$1,950.00 Nonpriority Creditor's Name When was the debt incurred? **Action Collection Agency** PO Box 902 Middleboro, MA 02346-0902 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 **Liberty Utilities** Last 4 digits of account number \$236.53 3653 Nonpriority Creditor's Name When was the debt incurred? PO Box 219501 Kansas City, MO 64121-9501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 23 of 54 Case number (f known)

Debtor 1 Reis, Kelly Jo 4.11 **National Grid** Last 4 digits of account number \$723.63 4011 Nonpriority Creditor's Name When was the debt incurred? **National Grid** PO Box 11737 Newark, NJ 07101-4737 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.12 QVC Last 4 digits of account number 8349 \$61.17 Nonpriority Creditor's Name When was the debt incurred? **Penn Credit Corporation** 916 S 14th St Harrisburg, PA 17104-3425 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.13 Steward St. Annes Hospital Last 4 digits of account number \$150.00 5830 Nonpriority Creditor's Name When was the debt incurred? **Action Colection Agency PO Box 902** Middleboro, MA 02346-0902 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 24 of 54 Case number (f known)

Debtor 1 Reis, Kelly Jo 4.14 \$89.04 Surgi-Care, Inc. Last 4 digits of account number **CT08** Nonpriority Creditor's Name When was the debt incurred? PO Box 550249 North Waltham, MA 02455-0259 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.15 Syncb/amazon Last 4 digits of account number 8457 \$813.00 Nonpriority Creditor's Name When was the debt incurred? 2014-10 PO Box 965015 Orlando, FL 32896-5015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Revolving account 4.16 **Verizon Wireless** Last 4 digits of account number \$115.20 3063 Nonpriority Creditor's Name When was the debt incurred? Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32255-1268 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 25 of 54

Case number (if known) Debtor 1 Reis, Kelly Jo 4.17 \$312.32 **Verizon Wireless** Last 4 digits of account number 5729 Nonpriority Creditor's Name When was the debt incurred? **US Asset Management Inc. EOS CCA** PO Box 981008 Boston, MA 02298-1008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.18 Webbank/fingerhut Last 4 digits of account number 4043 \$218.00 Nonpriority Creditor's Name When was the debt incurred? 2011-12 6250 Ridgewood Rd Saint Cloud, MN 56303-0820 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Revolving account Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Collection Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 551268 ■ Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32255-1268 Last 4 digits of account number 8499 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Ratchford Law Group, P.C. Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 89 Newbury St Ste 205 ■ Part 2: Creditors with Nonpriority Unsecured Claims Danvers, MA 01923-1075 Last 4 digits of account number 5013 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Ratchford Law Group, P.C. Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 89 Newbury St Ste 205 Part 2: Creditors with Nonpriority Unsecured Claims Danvers, MA 01923-1075 Last 4 digits of account number 0570

Part 4: Add the Amounts for Each Type of Unsecured Claim

Entered 02/04/19 10:40:24 Desc Main Case 19-10401 Doc 1 Filed 02/04/19 Page 26 of 54 Case number (f known) Document

Debtor 1 Reis, Kelly Jo

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 	12,881.19
		nore.		_	

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

		DOGUIDE	III Paue / Lui 54
Fill in th	nis information to identi	fy your case:	
Debtor 1	Kelly Jo Reis		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		DISTRICT OF MASSAC	HUSETTS, BOSTON DIVISION
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

		Docume	nt Page 28 d	of 54	
F	ill in this information to ident	ify your case:			
Debtor 1	Kelly Jo Reis				
Debtor 2	First Name	Middle Name	Last Name	,	
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF MASSAC	HUSETTS, BOSTON D	IVISION	
Case nun (if known)	nber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	lebtors			12/15
re filing t ind numb	ogether, both are equally res	ponsible for supplying con the left. Attach the Additi	rrect information. If mo	ore space is needed, c	te as possible. If two married people opy the Additional Page, fill it out, Iditional Pages, write your name and
1. Do	you have any codebtors? (If	you are filing a joint case, do	o not list either spouse as	a codebtor.	
■ No					
	thin the last 8 years, have you				v states and territories include Arizona,
`	o. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live w	ith you at the time?		
line 2 106D	again as a codebtor only if t	hat person is a guarantor	or cosigner. Make sure	e you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn lle E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,☐ Schedule G, lir	line
	Number Street			_	
	City	State	ZIP Code		

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 29 of 54

Fill	in this information to identify your ca	ise:								
De	btor 1 Kelly Jo Rei	s								
_	btor 2 puse, if filing)				_					
Uni	ited States Bankruptcy Court for the:	DISTRICT OF MASSA	ACHUSETTS, BOS	TON	_					
	se number nown)		-			□ A		ed filing	g postpetition o	chapter 13
0	fficial Form 106I					M	IM / DD/ Y	/YYY		
S	chedule I: Your Inco	ome								12/15
sup spo atta	as complete and accurate as possiplying correct information. If you ause. If you are separated and your ch a separate sheet to this form. On the complex of	are married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse is ide informa	livir ation	g with you about y	ou, inclu our spou	de informa ise. If more	tion about you space is ne	our eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed				☐ Employed			
		Employment status	☐ Not employed	☐ Not employed				mployed		
		Occupation	Nursing Assistant Steward St. Annes Hospital Corp.							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student o homemaker, if it applies.	r Employer's address	795 Middle St Fall River, MA 02721-1733							
		How long employed th	nere? <u>7 yea</u>	rs and 9 ı	mor	ths	_			
Pa	rt 2: Give Details About Mon	thly Income								
	mate monthly income as of the da	te you file this form. If y	ou have nothing to re	eport for any	y line	, write \$0	in the spa	ace. Includ	e your non-filir	ng spouse
	ou or your non-filing spouse have more ce, attach a separate sheet to this for		oine the information	for all emplo	oyers	for that p	person on	the lines be	elow. If you ne	ed more
						For Deb	otor 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	3,	326.24	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	3,32	26.24	\$	N/A	

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 30 of 54

ayroll deductions: A, Medicare, and Social Security deductions Indatory contributions for retirement plans Iduntary contributions of retirement fund loans Iduntary contributions Iduntary contrib	4. 5a. 5b. 5c. 5d. 5e. 5f. 5g. 7. 6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,326.24 690.17 0.00 0.00 0.00 80.82 0.00 29.47 800.46 2,525.78	Non-fill	N/A
ayroll deductions: A, Medicare, and Social Security deductions Indatory contributions for retirement plans Identary contributions Identary contribut	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+ 6. 7.	\$	690.17 0.00 0.00 0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$	N/A
Ayroll deductions: A, Medicare, and Social Security deductions Indatory contributions for retirement plans Iduntary contributions Iduntary contributions Iduntary contributions Iduntary retirement fund loans Iduntary contributions Iduntary c	5b. 5c. 5d. 5e. 5f. 5g. 6. 7.	\$	0.00 0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A
A, Medicare, and Social Security deductions and atory contributions for retirement plans duntary contributions for retirement plans quired repayments of retirement fund loans urance mestic support obligations for deductions. Specify: Short Term Disability Dayroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Let total monthly take-home pay. Subtract line 6 from line 4. Their income regularly received: Let income from rental property and from operating a business, offession, or farm and ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total nuthly net income. Therefore, and Social Security deductions are retirement plans.	5b. 5c. 5d. 5e. 5f. 5g. 6. 7.	\$	0.00 0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A
Indatory contributions for retirement plans Juntary contributions for retirement plans quired repayments of retirement fund loans urance mestic support obligations ion dues her deductions. Specify: Short Term Disability payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. The total monthly take-home pay. Subtract line 6 from line 4. Ther income regularly received: Income from rental property and from operating a business, offession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Therefore, and the total inthly net income. Therefore, and dividends mily support payments that you, a non-filing spouse, or a dependent pullarly receive lude alimony, spousal support, child support, maintenance, divorce	5b. 5c. 5d. 5e. 5f. 5g. 6. 7.	\$	0.00 0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A
duntary contributions for retirement plans quired repayments of retirement fund loans urance mestic support obligations ion dues her deductions. Specify: Short Term Disability payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. The total monthly take-home pay. Subtract line 6 from line 4. Ther income regularly received: Income from rental property and from operating a business, offession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Therefore, and dividends mily support payments that you, a non-filing spouse, or a dependent pullarly receive lude alimony, spousal support, child support, maintenance, divorce	5c. 5d. 5e. 5f. 5g. 6. 7.	\$	0.00 0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A
quired repayments of retirement fund loans urance mestic support obligations ion dues ner deductions. Specify: Short Term Disability payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. In total monthly take-home pay. Subtract line 6 from line 4. Income regularly received: It income from rental property and from operating a business, ofession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Interest and dividends mily support payments that you, a non-filing spouse, or a dependent pullarly receive lude alimony, spousal support, child support, maintenance, divorce	5d. 5e. 5f. 5g. 5h.+ 6. 7.	\$	0.00 80.82 0.00 0.00 29.47 800.46 2,525.78	\$	N/A N/A N/A N/A N/A N/A
urance mestic support obligations ion dues mer deductions. Specify: Short Term Disability payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. In total monthly take-home pay. Subtract line 6 from line 4. Income regularly received: It income from rental property and from operating a business, offession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Interest and dividends In	5e. 5f. 5g. 5h.+ 6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	80.82 0.00 0.00 29.47 800.46 2,525.78	\$ \$ + \$ \$	N/A N/A N/A N/A N/A
mestic support obligations ion dues her deductions. Specify: Short Term Disability bayroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. It total monthly take-home pay. Subtract line 6 from line 4. Income regularly received: It income from rental property and from operating a business, offession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total nthly net income. Income the total number of the tot	5f. 5g. 5h.+ 6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 29.47 800.46 2,525.78	\$ \$ \$ \$	N/A N/A N/A N/A
son dues ther deductions. Specify: Short Term Disability Dayroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Total monthly take-home pay. Subtract line 6 from line 4. Ther income regularly received: It income from rental property and from operating a business, offession, or farm Such a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Therefore the description of the total inthly net income. Therefore the description of the total inthly support payments that you, a non-filling spouse, or a dependent pullarly receive lude alimony, spousal support, child support, maintenance, divorce	5g. 5h.+ 6. 7. 8a. 8b.	\$ \$ \$	0.00 29.47 800.46 2,525.78	+ \$	N/A N/A N/A N/A
short Term Disability bayroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. be total monthly take-home pay. Subtract line 6 from line 4. be ther income regularly received: t income from rental property and from operating a business, offession, or farm and a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Berest and dividends mily support payments that you, a non-filing spouse, or a dependent pularly receive lude alimony, spousal support, child support, maintenance, divorce	5h.+ 6. 7. 8a. 8b.	\$ \$ \$	29.47 800.46 2,525.78	+ \$	N/A N/A N/A
chayroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. At total monthly take-home pay. Subtract line 6 from line 4. Ather income regularly received: At income from rental property and from operating a business, offession, or farm and a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total nthly net income. Berest and dividends The income income income. The income income income. The income income income income income income. The income income income income income income income income income. The income i	6. 7. 8a. 8b.	\$ \$	800.46 2,525.78 0.00	\$ \$ \$	N/A N/A
total monthly take-home pay. Subtract line 6 from line 4. ther income regularly received: tincome from rental property and from operating a business, ofession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total inthly net income. Therest and dividends mily support payments that you, a non-filing spouse, or a dependent fullarly receive lude alimony, spousal support, child support, maintenance, divorce	7. 8a. 8b.	\$	2,525.78	\$	N/A
ther income regularly received: t income from rental property and from operating a business, ofession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total nthly net income. erest and dividends mily support payments that you, a non-filing spouse, or a dependent pularly receive lude alimony, spousal support, child support, maintenance, divorce	8a. 8b.	\$	0.00	\$	N/A_
t income from rental property and from operating a business, ofession, or farm ach a statement for each property and business showing gross eipts, ordinary and necessary business expenses, and the total nthly net income. Berest and dividends mily support payments that you, a non-filing spouse, or a dependent pularly receive lude alimony, spousal support, child support, maintenance, divorce	8b.	\$ \$			
erest and dividends mily support payments that you, a non-filing spouse, or a dependent jularly receive lude alimony, spousal support, child support, maintenance, divorce	8b.	\$			
mily support payments that you, a non-filing spouse, or a dependent ularly receive lude alimony, spousal support, child support, maintenance, divorce		Ψ	0.00	Ψ	IWA_
tlement, and property settlement.	8c.	\$	0.00	\$	N/A
employment compensation	8d.	\$	0.00	\$	N/A
cial Security	8e.	\$	0.00	\$	N/A
ner government assistance that you regularly receive lude cash assistance and the value (if known) of any non-cash assistance tyou receive, such as food stamps (benefits under the Supplemental trition Assistance Program) or housing subsidies.	8f.	\$	0.00		N/A
nsion or retirement income	— 8g.	\$	0.00	\$	N/A
ner monthly income. Specify:	8h.+	\$		+ \$	N/A
ther income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
e monthly income. Add line 7 + line 9. ntries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,525.78 + \$	l	N/A = \$ 2,525.78
ontributions from an unmarried partner, members of your household, your olds or relatives.	lependen		•		e J. 11. +\$ 0.0 0
			•		12. \$ 2,525.78
					Combined monthly income
בו בו בו	ther regular contributions to the expenses that you list in Schedule ntributions from an unmarried partner, members of your household, your class or relatives. ude any amounts already included in lines 2-10 or amounts that are not as mount in the last column of line 10 to the amount in line 11. The reserved	ther regular contributions to the expenses that you list in Schedule J. Intributions from an unmarried partner, members of your household, your dependent it is or relatives. In the last column of line 10 to the amount in line 11. The result is the Improvement in the last column of Schedules and Statistical Summary of Certain Liabilitie	ther regular contributions to the expenses that you list in Schedule J. Intributions from an unmarried partner, members of your household, your dependents, you dis or relatives. Intributions from an unmarried partner, members of your household, your dependents, you dis or relatives. Intributions are not available to pay expendent and the state of the second partners of the second partner	ther regular contributions to the expenses that you list in Schedule J. ntributions from an unmarried partner, members of your household, your dependents, your roommates, ands or relatives. ude any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in mount in the last column of line 10 to the amount in line 11. The result is the combined monthly included.	ther regular contributions to the expenses that you list in Schedule J. Intributions from an unmarried partner, members of your household, your dependents, your roommates, and dis or relatives. Intributions from an unmarried partner, members of your household, your dependents, your roommates, and dis or relatives. Intributions already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule and amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. In amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 31 of 54

511	in this informa	tion to identify you	ır case:			1		
	in triis inionna					Ch	eck if this is:	
Deb	NOI I	Kelly Jo Reis					An amended filing	
	otor 2 ouse, if filing)						A supplement show expenses as of the	ving postpetition chapter 13 following date:
Unit	ed States Bankr	ruptcy Court for the:	DISTRI DIVISIO	CT OF MASSACHUSETTS	S, BOSTON		MM / DD / YYYY	
1	e number nown)							
O ₁	fficial Fo	rm 106J				J		
Sc	chedule	J: Your E	xpen	ises				12/1
info	ormation. If m		ded, attac	If two married people are ch another sheet to this fo				supplying correct ur name and case numbe
Par 1.	t 1: Descr	ribe Your Househ	old					
••	■ No. Go to		a separa	ate household?				
	□ N □ Y		file Offici	al Form 106J-2,Expenses	for Separate Housel	noldof Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			-			☐ Yes ☐ No
							_	Yes
								□ No □ Yes
								□ No
2	De veur eur	annan inaluda	_					☐ Yes
3.	expenses of	penses include f people other tha d your dependen	an ┌	No I Yes				
exp	imate your ex		ur bankru	y Expenses uptcy filing date unless yo v is filed. If this is a suppl				
valu		sistance and hav		government assistance if ed it on Schedule I: Your I			Your exp	penses
(•		,						
4.		or home ownershid any rent for the g		ses for your residence. In lot.	clude first mortgage	4.	\$	650.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	·	0.00
	•	rty, homeowner's,				4b.	·	0.00
		maintenance, repowner's association				4c. 4d.	·	50.00 0.00
5.				our residence, such as hon	ne equity loans	5.		0.00

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 32 of 54

Utilit		_	•	
6a.	Electricity, heat, natural gas		\$	295.00
6b.	Water, sewer, garbage collection	6b.	•	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	150.00
6d.	Other. Specify:	6d.		0.00
	I and housekeeping supplies	7.		500.00
	dcare and children's education costs	8.	\$	0.00
	ning, laundry, and dry cleaning	9.	\$	125.00
Pers	onal care products and services		\$	80.00
Medi	ical and dental expenses	11.	\$	150.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	250.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
	itable contributions and religious donations	14.	\$	50.00
Insu	•	14.	*	30.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	80.00
	Vehicle insurance	15c.	·	110.00
	Other insurance. Specify:	15d.		0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	13d.	*	0.00
Spec	ify: Vehicle Excise Tax	16.	\$	15.00
	Illment or lease payments: Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17a.	·	
	Other. Specify:	17b.	·	0.00
				0.00
	Other. Specify:	17d.	>	0.00
	payments of alimony, maintenance, and support that you did not report a acted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
	r payments you make to support others who do not live with you.).	\$	0.00
Spec		19.	<u> </u>	0.00
	r real property expenses not included in lines 4 or 5 of this form or on Scl		r Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20u. 20e.		0.00
		20e. 21.	·	
	r: Specify:		 φ	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,555.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,555.00
	ulate your monthly net income.	l		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,525.78
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,555.00
				_,555.66
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-29.22
For ex	ou expect an increase or decrease in your expenses within the year after year apple, do you expect to finish paying for your car loan within the year or do you expect y ication to the terms of your mortgage?			ase or decrease because o
☐ Ye	es. Explain here:			

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 33 of 54

Fill in this in	formation to identify yo	our case:			
Debtor 1	Kelly Jo Reis				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nove	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	DISTRICT OF MASSACI	HUSETTS, BOSTON DIVISION		
Case number					
(if known)					Check if this is an
					amended filing
Official Forn	<u>n 106Dec</u>				
Declarat	ion About a	n Individual	Debtor's Sche	dules	12/15
If two married pe	ople are filing together,	both are equally respons	sible for supplying correct info	rmation.	
Vari muat fila thic	a form whonover you fil	a bankruntay aabadulaa d	or amended schedules. Making	a folco etetement, conor	acling property or
			uptcy case can result in fines u		
years, or both. 18	8 U.S.C. §§ 152, 1341, 15	519, and 3571.			•
Cim	- Dalam				
Sign	n Below				
Did you no	v or oaroo to nov como	ana who is NOT an attorn	ey to help you fill out bankrupt	iou forma?	
Did you pay	y or agree to pay some	one who is NOT an attorn	ey to neip you iiii out bankrupt	cy forms:	
■ No					
	1 (Attack Daylown (av. Day	iii aa Baanaan da Mariaa
☐ Yes. N	Name of person			 Attach Bankruptcy Peti Declaration, and Signal 	ition Preparer's Notice, iture (Official Form 119)
				2 oolaration, arra olgrial	taro (Gineral Form 110)
	ity of perjury, I declare t e true and correct.	that I have read the summ	ary and schedules filed with th	is declaration and	
triat triey are	e true and correct.				
X /s/ Kell	,		X		
Kelly J			Signature of Debtor	2	
Signatur	re of Debtor 1				

Date ____

Date February 4, 2019

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 34 of 54

	Fill in this	information to identi	fv vour case:									
Deb			., , ,									
Den	101 1	Kelly Jo Reis First Name	Middle Name	Last Name								
	tor 2 ise if, filing)	First Name	Middle Name	Last Name								
		nkruptcy Court for the:		IUSETTS, BOSTON DIVISIO	N							
Offic	eu States Dai	ikrupicy Court for the.	DISTRICT OF WASSACE	1032113, 0031011 0111310								
Cas (if kno	e number own)				_	heck if this is an mended filing						
	,					nonded iiiing						
Off	icial Fo	rm 107										
Sta	tement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	4/16						
					qually responsible for supply							
		er every question.	attacii a separate sheet to ti	ils form. On the top of any	additional pages, write your i	iaine and case number						
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before								
1.	What is your	current marital statu	s?									
	☐ Married											
	■ Not mar	arried										
2.	During the last 3 years, have you lived anywhere other than where you live now?											
	■ No	No										
	Yes. List	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there						
					y property state or territory?							
state	s and territorie	es include Arizona, Cal	ifornia, Idaho, Louisiana, Nev	ada, New Mexico, Puerto Ric	o, Texas, Washington and Wis	consin.)						
	■ No	CII O. /										
	☐ Yes. Ma	ke sure you fill out Sche	edule H: Your Codebtors (Offic	ciai Form 106H).								
Part	2 Explain	n the Sources of You	Income									
	Fill in the tota	I amount of income you	ployment or from operating u received from all jobs and a ave income that you receive to	Il businesses, including part-		ar years?						
	□ No											
	Yes. Fill	in the details.										
			Debtor 1		Debtor 2							
			Sources of income	Gross income	Sources of income	Gross income						
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)						
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,891.93	☐ Wages, commissions, bonuses, tips							
			☐ Operating a business		☐ Operating a business							

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Page 35 of 54 Document ase number(*if known*) Debtor 1 Reis, Kelly Jo Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$33,065.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$40,039.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of

which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ Yes. List all payments to an insider.

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Page 36 of 54 Case number (if known) Document Debtor 1 Reis, Kelly Jo

8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost	•		nents or transfer ar	ny property	on account of a de	ot that benefited an			
	■ No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Date	es of payment	Total amount paid	Amount still		this payment ditor's name			
Par	t 4: Identify Legal Actions, Repossessio	ns, and	Foreclosures							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.									
	■ No □ Yes. Fill in the details.									
	Case title Case number	Natu	ure of the case	Court or agency	Status of th	Status of the case				
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below. No. Go to line 11.		s any of your proper	ty repossessed, fo	reclosed, ga	arnished, attached,	seized, or levied?			
	☐ Yes. Fill in the information below.									
	Creditor Name and Address	Des	Describe the Property			Date	Value of the property			
		Exp	lain what happened							
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.									
	Creditor Name and Address Describe the action the creditor took Date action was taken									
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No									
	Yes									
Par	List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 person	per	Describe the gifts			Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankru			or contributions w	rith a total va	alue of more than \$	600 to any charity?			
	Yes. Fill in the details for each gift or con	tribution								
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you	contributed		Dates you contributed	Value			
Par	t 6: List Certain Losses									

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 37 of 54 Case number (if known)

	or gambling?					
	No No					
	Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the los the amount that insurance has paid. Lis ce claims on line 33 of Schedule A/B: Pr	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	2				
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition pr	ptcy, did	a bankruptcy petition?			y to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ou	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
	Carreiro Law Office, PLLC 1010 Gar Hwy Ste 12 Swansea, MA 02777-4566		Electronic Payment and Check	ī	12/28/2018	\$2,500.00
	Urgent Credit Counseling 219 SW Harvey Milk St Ste 200 Portland, OR 97204-2648		Debit Card		1/28/2019	\$50.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	ditors or	to make payments to your creditors?		transfer any propert	y to anyone who
	No					
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already lists. No Yes. Fill in the details.	Ir busine made as	ss or financial affairs? security (such as the granting of a secur		rty to anyone, other	
	Person Who Received Transfer		Description and value of	Describe a	iny property or	Date transfer was
	Address		property transferred		received or debts	made
	Person's relationship to you					
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No ■ Yes. Fill in the details.			f-settled trus	t or similar device of	i which you are a
	Name of trust		Description and value of the propert	ty transferre	d	Date Transfer was made

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main

Page 38 of 54
Case number (if known) Document Debtor 1 Reis, Kelly Jo

Par	t 8: List of Certain Financial Accounts, In	strun	nents, Safe Deposit	Boxes, and Stor	age Units			
20.	sold, moved, or transferred? Include checking, savings, money market,	gs, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage cooperatives, associations, and other financial institutions.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred		st balance before osing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year	before you filed for	bankruptcy, any	/ safe depo	osit box or other deposi	tory fo	or securities,
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S and ZIP Code)		Describe	the contents		Do you still have it?
22.	Have you stored property in a storage unit	or pla	ace other than your	home within 1 y	ear before	you filed for bankrupto	y?	
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, S and ZIP Code)		Describe	the contents		Do you still have it?
Par	t 9: Identify Property You Hold or Contro	l for S	Someone Else					
23.	Do you hold or control any property that so someone.	omeo	ne else owns? Inclu	de any property	you borro	owed from, are storing for	or, or	hold in trust for
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the proj (Number, Street, City, Code)		Describe	the property		Value
Par	t 10: Give Details About Environmental Inf	forma	ition					
For	the purpose of Part 10, the following definiti	ons a	ipply:					
	Environmental law means any federal, state toxic substances, wastes, or material into t controlling the cleanup of these substances	he air	, land, soil, surface					
	Site means any location, facility, or propert own, operate, or utilize it, including disposa	y as	defined under any e	nvironmental la	w, whethe	r you now own, operate	, or uti	ilize it or used to
	Hazardous material means anything an environmental, pollutant, contaminant, or similar			s a hazardous v	vaste, haza	ardous substance, toxic	subst	ance, hazardous
Rep	ort all notices, releases, and proceedings th	at yo	u know about, rega	dless of when t	ney occurr	red.		
24.	Has any governmental unit notified you that	at you	may be liable or po	otentially liable u	ınder or in	violation of an environ	menta	l law?
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental ur Address (Number, S			onmental law, if you it		Date of notice

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Document Page 39 of 54 ase number (if known) Debtor 1 Reis, Kelly Jo 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kelly J. Reis Signature of Debtor 2 Kelly Jo Reis Signature of Debtor 1 Date February 4, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 40 of 54

Fill in this	information to identif	v vour case:		
Debtor 1	Kelly Jo Reis First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	DISTRICT OF MAS	SSACHUSETTS, BOSTON DIVISION	
	., .,		·	
Case number(if known)				☐ Check if this is an amended filing
Official For		n for Indiv	iduals Filing Under Chapte	er 7 12/15
	dual filing under chap	• •	out this form if:	
you have leased You must file this	d personal property an	d the lease has not hin 30 days after yo	expired. ou file your bankruptcy petition or by the date set t time for cause. You must also send copies to the c	
	ple are filing together i the form.	n a joint case, both	are equally responsible for supplying correct info	rmation. Both debtors must sign
	d accurate as possible ir name and case num		eeded, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List You	ır Creditors Who Have	Secured Claims		
1 For any creditor	s that you listed in Par	t 1 of Schedule D: (Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
information belo	ow.		, , ,	
Identify the cred	litor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	ells Fargo Dealer		Surrender the property.	■ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	□Yes
Description of	2007 Dodge Nitro 2	:WD	Agreement.	33
property securing debt:			☐ Retain the property and [explain]:	
				_
	r Unexpired Personal		Schedule G: Executory Contracts and Unexpired	Leases (Official Form 106G), fill in
the information be	low. Do not list real es	tate leases. Unexpir	red leases are leases that are still in effect; the leases the does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your une	expired personal prope	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lease	ed			
Property:				☐ Yes
Lessor's name:	a d			□ No
Description of lease Property:	ea			☐ Yes
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 41 of 54

Debtor	Reis, Kelly Jo	Case number (if known)	
Descrip Proper	ion of leased :		☐ Yes
Lessor Descrip Proper	ion of leased		□ No □ Yes
Lessor	name: ion of leased		□ No □ Yes
Lessor	name: ion of leased		□ No
Lessor			☐ Yes ☐ No
Proper Part 3:	Sign Below		☐ Yes
Under p	enalty of perjury, I declare that I have indicated my intention ab that is subject to an unexpired lease.	out any property of my estate that secu	res a debt and any personal
K	Kelly J. Reis Illy Jo Reis nature of Debtor 1	Signature of Debtor 2	
D	February 4, 2019	Date	

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 42 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Massachusetts, Boston Division

In re	Reis, Kelly Jo	, , , , , , , , , , , , , , , , , , , ,	Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMI	PENSATION OF ATTO	RNEY FOR I	DEBTOR	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy	, or agreed to be pa	id to me, for services rea	
	For legal services, I have agreed to accept		\$	2,500.00	
	Prior to the filing of this statement I have received	ed	\$	2,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed confirm.	mpensation with any other person	unless they are me	mbers and associates of	my law
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ts of the bankruptcy	case, including:	
t	 a. Analysis of the debtor's financial situation, and rer b. Preparation and filing of any petition, schedules, s c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] The attorney agrees to represent the comatters, and in any adversary proceed debt. The attorney agrees to represent named defendant. 	statement of affairs and plan which ditors and confirmation hearing, and debtor in all aspects of the midding relating to the debtor's of the	h may be required; nd any adjourned he nain case, includ discharge and/o	earings thereof; ing motions and con r the dischargability	ntested of any
6. I	By agreement with the debtor(s), the above-disclosed	fee does not include the following	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of pankruptcy proceeding.	any agreement or arrangement for	r payment to me for	representation of the de	ebtor(s) in
F	ebruary 4, 2019	/s/ Christopher Ca	arreiro		
D	Date	Christopher Carre Signature of Attorne Carreiro Law Office	y		_
		1010 Gar Hwy Ste Swansea, MA 027 (508) 812-0210 F chris@carreiroph	777-4566 ax: (508) 809-746	35	

Name of law firm

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 43 of 54 United States Bankruptcy Court District of Massachusetts, Boston Division

IN RE:		Case No
Reis, Kelly Jo		Chapter 7
· · ·	Debtor(s)	<u> </u>
	VERIFICATION OF CREDITO	R MATRIX
The above named debtor(s) herel	by verify(ies) that the attached matrix listin	g creditors is true to the best of my(our) knowledge.
Date: February 4, 2019	Signature: /s/ Kelly J. Reis	
	Kelly J. Reis	Debtor
Date:	Signature:	
		Joint Debtor, if any

Amazon/Synchrony Bank PO Box 965060 Orlando, FL 32896-5060

Big Lots Credit Card Comenity Capital Bank Bankruptcy Departm PO Box 183043 Columbus, OH 43218-3043

Capital One Bank (USA), N.A. PO Box 71083 Charlotte, NC 28272-1083

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Collection PO Box 551268 Jacksonville, FL 32255-1268

Comenitybank/wayfair Comenity Bank Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125

DirectTV PO Box 5007 Carol Stream, IL 60197-5007 Dutchman Dental, LLC 199 Pleasant St Fall River, MA 02721-3013

George Rodrigues DDS Action Collection Agency PO Box 902 Middleboro, MA 02346-0902

Liberty Utilities PO Box 219501 Kansas City, MO 64121-9501

National Grid National Grid PO Box 11737 Newark, NJ 07101-4737

QVC Penn Credit Corporation 916 S 14th St Harrisburg, PA 17104-3425

Ratchford Law Group, P.C. 89 Newbury St Ste 205 Danvers, MA 01923-1075

Steward St. Annes Hospital Action Colection Agency PO Box 902 Middleboro, MA 02346-0902

Surgi-Care, Inc. PO Box 550249 North Waltham, MA 02455-0259

Syncb/amazon PO Box 965015 Orlando, FL 32896-5015

Verizon Wireless Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32255-1268

Verizon Wireless
US Asset Management Inc. EOS CCA
PO Box 981008
Boston, MA 02298-1008

Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303-0820

Wells Fargo Dealer PO Box 17900 Denver, CO 80217-0900

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 47 of 54

Fill in this in	formation to identify your case:		Che	ck one box only as o	directed in this form and	d in Form
Debtor 1	Kelly Jo Reis			A-1Supp:		2 111 1 01111
Debtor 2				1. There is no pres	cumption of abuse	
(Spouse, if filing	<u></u>				•	
United State	District of Massac Division	husetts, Boston	_	applies will be i	to determine if a presui made under <i>Chapter 7 N</i> ïcial Form 122A-2).	•
Case numb (if known)	er				does not apply now bed but it could apply later.	cause of qualified
				Check if this is	an amended filing	
Official	Form 122A - 1					
Chapte	er 7 Statement of Your Cur	rent Mont	hly Inco	me		12/1
a separate sh number (if kn military servi	te and accurate as possible. If two married people a eet to this form. Include the line number to which the own). If you believe that you are exempted from a poe, complete and file Statement of Exemption from Calculate Your Current Monthly Income	ne additional information of abus	ation applies. O e because you	n the top of any addi	tional pages, write your consumer debts or bec	name and case ause of qualifying
1. What i	s your marital and filing status? Check one on	ly.				
■ Not	married. Fill out Column A, lines 2-11.					
□Ма	rried and your spouse is filing with you. Fill ou	t both Columns A	and B, lines 2-	11.		
□Ма	rried and your spouse is NOT filing with you.	You and your spo	use are:			
ا 🗆 ا	iving in the same household and are not lega	Ily separated. Fill	out both Colur	nns A and B, lines 2	-11.	
	.iving separately or are legally separated. Fill of penalty of perjury that you and your spouse are legapart for reasons that do not include evading the N	ally separated unde	er nonbankrupt	cy law that applies o		
101(10A). 6 months,	average monthly income that you received from all For example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total by the rental property, put the income from that property in	nonth period would be 6. Fill in the result. Do	e March 1 throug o not include any	h August 31. If the amo income amount more	ount of your monthly incom than once. For example, it	ne varied during the
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, a deductions).	and commissions	(before all	3,582.10	\$	
3. Alimo	ny and maintenance payments. Do not include n B is filled in.	payments from a s	spouse if	0.00	\$	
of you from a roomm	ounts from any source which are regularly pa or your dependents, including child support. In unmarried partner, members of your household, mates. Include regular contributions from a spouse include payments you listed on line 3	Include regular co	ontributions	0.00	\$	
	come from operating a business, profession,	or farm				
		Debto	or 1			
Gross	receipts (before all deductions)	\$ 0.00				
	ry and necessary operating expenses	-\$ 0.00	Samu hara . (0.00	Φ	
	onthly income from a business, profession, or far	m \$ C	Copy here -> \$		\$	
6. Net in	come from rental and other real property	Debto	or 1			
0.00	receipts (before all deductions)	\$ 0.00	<i>7</i> 1 1			
	receipts (before all deductions)	-\$ 0.00				
	ry and necessary operating expenses onthly income from rental or other real property	·	Copy here -> \$	0.00	\$	
	, , ,	Ψ	• •	0.00	\$	
/. interes	st, dividends, and royalties		•			

Official Form 122A-1

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 48 of 54

Debtor 1 Reis, Kelly Jo Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing spouse
8.	Unemployment compensation			\$	0.00	\$
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit u	under the			
	For you \$	0	.00			
	For you \$ For your spouse \$					
9.	Pension or retirement income. Do not include any amo under the Social Security Act.	ount received that was	a benefit	\$	0.00	\$
10.	Income from all other sources not listed above. Spec not include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or interior in the security, list other sources on a separate page and pure .	ty Act or payments rec national or domestic te ut the total below.	eived as	\$	0.00	\$
				\$	0.00	\$
	Total amounts from separate pages, if any.			\$	0.00	\$
					1	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$3	3,582.10	+ \$	Total current monthly income
Part	2: Determine Whether the Means Test Applies to	You				income
12.	Calculate your current monthly income for the year.	Follow these steps:				
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	s\$\$
	Multiply by 12 (the number of months in a year)					x 12
	12b. The result is your annual income for this part of the	form				12b. \$ 42,985.20
13.	Calculate the median family income that applies to y	ou. Follow these steps	3:			
	Fill in the state in which you live.	MA				
	Fill in the number of people in your household.	1				[
	Fill in the median family income for your state and size of	***************************************				13. \$ 64,907.00
	To find a list of applicable median income amounts, go of form. This list may also be available at the bankruptcy c		pecified in	the separat	e instructio	ons for this
14.	How do the lines compare?					
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, ch	neck box 1	T,here is no p	presumptio	n of abuse.
	14b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	Ţhe presu	mption of ab	use is dete	rmined by Form 122A-2.
Part	3: Sign Below					
	By signing here, I declare under penalty of perjury th	at the information on t	his statem	nent and in ar	ny attachm	ents is true and correct.
	X /s/ Kelly J. Reis					
	Kelly Jo Reis					
	Signature of Debtor 1					
	Date February 4, 2019 MM / DD / YYYY					
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.				
	If you checked line 14b, fill out Form 122A-2 and fil	le it with this form.				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
;	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
;	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. $_{\rm B201B~(Form~2}\mbox{Case,19-10401}$

Doc 1 Filed 02/04/19 Document

Entered 02/04/19 10:40:24 Page 53 of 54

Desc Main

United States Bankruptcy Court

District of Massachusetts, Boston Division

IN RE:		Case No.
Reis, Kelly Jo		Chapter 7
	Debtor(s)	

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)

UNDER §	342(b) OF THE BANKRUPTCY C	CODE
Certificate of	Non-Attorney] Bankruptcy Petition	Preparer
I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy		fy that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X		(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of office partner whose Social Security number is provided		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have rece	ived and read the attached notice, as requi	red by § 342(b) of the Bankruptcy Code.
Reis, Kelly Jo	X /s/ Kelly J. Reis	2/04/2019
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint D	Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

© 2019 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)

Case 19-10401 Doc 1 Filed 02/04/19 Entered 02/04/19 10:40:24 Desc Main Document Page 54 of 54

UNITED STATES BANKRUPTCY COURT

District of Massachusetts, Boston Division

In re Reis, Kelly Jo

Case No: Chapter 7

Debtor

DECLARATION RE: ELECTRONIC FILING (MA - LOCAL FORM)

$\mathbf{P}_{\mathbf{\Lambda}}$	RT	` T_	D	\mathbf{ECI}	[. A]	RΔ	TI	V

with the electronic filing of the Doc	ument. I unders	, hereby declare(s) under penalty of perjury that all of the (singly or jointly the "Document"), filed electronically, is TION is to be filed with the Clerk of Court electronically concurrently stand that failure to file this DECLARATION may cause the Document ereon to be denied, without further notice.
documents containing original signal	atures executed to e and shall be m	assachusetts Electronic Filing Local Rule (MEFR) 7(b), all paper under the penalties of perjury and filed electronically with the Court are naintained by the authorized CM/ECF Registered User for a period of
Dated: February 4, 2019		
		(Affiant)
		(Ioint Affiant)

PART II - DECLARATION OF ATTORNEY (IF AFFIANT IS REPRESENTED BY COUNSEL)

I certify that the affiant(s) signed this form before I submitted the Document, I gave the affiant(s) a copy of the Document and this DECLARATION, and I have followed all other electronic filing requirements currently established by local rule and standing order. This DECLARATION is based on all information of which I have knowledge and my signature below constitutes my certification of the foregoing under Fed. R. Bankr. P. 9011. I have reviewed and will comply with the provisions of MEFR 7.

Signed:

(Attorney for Affiant) Christopher Carreiro 693545 Carreiro Law Office, PLLC 1010 Gar Hwy Ste 12 Swansea, MA 02777-4566 (508) 812-0210